

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	[DataVault X4 Multi-Network Secure Computer]																				
Application Number :																					
Date :																					
First Named Applicant:	Mr. Peter Paul Shiakallis																				
Attorney Docket Number:																					
TOTAL FEE AUTHORIZED \$ 675																					
Patent fees are subject to annual revisions on or about October 1st of each year.																					
Filing as small entity																					
BASIC FILING FEE																					
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>375</td><td>375</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 375</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	375	375				Subtotal For Basic Filing Fees: \$ 375								
Fee Description	Fee Code	Amount \$	Fee Paid \$																		
Utility Filing Fee	2001	375	375																		
			Subtotal For Basic Filing Fees: \$ 375																		
EXTRA CLAIM FEES																					
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 19</td><td>0</td><td>2202</td><td>9</td><td>0</td></tr><tr><td>Independent Claims : 0</td><td>0</td><td>2201</td><td>42</td><td>0</td></tr><tr><td colspan="4"></td><td>Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table>		Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 19	0	2202	9	0	Independent Claims : 0	0	2201	42	0					Subtotal For Extra Claims Fees: \$ 0
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																	
Total Claims : 19	0	2202	9	0																	
Independent Claims : 0	0	2201	42	0																	
				Subtotal For Extra Claims Fees: \$ 0																	
PRE GRANT PUBLICATIONS FEES																					
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Publication Fee For Early or Voluntary Publication</td><td>1504</td><td>300</td><td>300</td></tr><tr><td colspan="3"></td><td>Subtotal For Additional Fees: \$300</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Publication Fee For Early or Voluntary Publication	1504	300	300				Subtotal For Additional Fees: \$300								
Fee Description	Fee Code	Amount \$	Fee Paid \$																		
Publication Fee For Early or Voluntary Publication	1504	300	300																		
			Subtotal For Additional Fees: \$300																		
AUTHORIZED BILLING INFORMATION																					
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																					
Credit account number:	1251																				
Expiration Date (YYYYMMDD):	2003-05-31																				
Authorized name:	James F Christian																				
Billing address:	23321																				